



LAND USE SERVICES DEPARTMENT  
Planning Division

**San Bernardino Office**  
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PROFESSIONAL CONSULTATION

- ☐ **Rebuild Letter\*** (Minimum 1 hour)  
☐ **Meeting Request\*\*** (Minimum 1 hour)  
☐ **Miscellaneous** (i.e., research)

This form must be completed prior to work being performed or a meeting scheduled. After you complete the front portion of this form, the public information counter staff will answer any questions you may have.

**Fee:** Submit a money order or check made out to San Bernardino County in the amount of **\$82.00/one-half hour**. (L691)

APPLICANT - PLEASE COMPLETE

Applicant's Name: \_\_\_\_\_ Date: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Site Address: \_\_\_\_\_

Assessor's Parcel #: \_\_\_\_\_ Phone #: \_\_\_\_\_

Proposed project (if any): \_\_\_\_\_

Existing site conditions/development (if any): \_\_\_\_\_

Questions/Comments: \_\_\_\_\_

**Applicant Signature** – by signing below, I have read and understand the contents of this form.

\_\_\_\_\_  
Signature

.....  
**\*Rebuild Letter** - In order for a Rebuild Letter to be issued, staff will perform research to determine: 1) that the residence(s) in question was legally built; and 2) that the residential use has continued since that time. If we are unable to find the applicable permits, the letter cannot be issued. If you would like the letter faxed somewhere or wish to pick it up, please indicate such on the "Questions/Comments" line.

**PLEASE NOTE:** San Bernardino County Development Code Section 84.17.040 (c) requires that in order for a non-conforming use (a use no longer compatible with its current zoning) to be rebuilt if damaged or destroyed, 25% of the value must remain. The remaining value would be determined by a Building and Safety Inspector at the necessary time.

**\*\*Meeting Request** – After receipt of this application and fees, a planner will contact you to schedule an appointment.

**PLEASE NOTE:** Any information provided by staff during a consultation is **NOT** a guarantee of project success or failure as all projects are subject to a comprehensive review of a formal application submittal. Also, policy changes or new ordinances adopted subsequently to this meeting may alter any determination made.

## FINANCIALLY RESPONSIBLE PARTY INFORMATION

Please print your responses.

The Financially Responsible Party is the individual or legal entity that will sign the Financially Responsible Party Agreement (immediately following), which agreement establishes the entity that: is responsible for all permit processing costs associated with the project application, will receive project accounting during the application processing, is responsible for paying for consultants necessary to complete the processing of the project application is deemed the owner of funds held in the project trust fund, and indemnifies the County for legal challenges to project approval.

Have you ever had a Trust Account with San Bernardino County Land Use Services? ☐ Yes ☐ No

If yes, what name was used? \_\_\_\_\_

Financially Responsible Party Name: \_\_\_\_\_

The Financially Responsible Party is a (choose one): ☐ Company/Organization ☐ Individual

If Company/Organization, type, i.e. corporation, LLC, partnership: \_\_\_\_\_

Are you registered with the California Secretary of State? ☐ Yes ☐ No

If yes, what is your entity number? \_\_\_\_\_

If Company/Organization, Contact Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_  
City State Zip

Home/Business Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

What is your preferred method for receiving invoices: ☐ Email ☐ U.S. Mail

If you are not the Financially Responsible Party, do you have notarized authorization to encumber the Financially Responsible party? ☐ Yes ☐ No (Please attach a copy of the authorization.)

----- For Office Use Only -----

Project Number: \_\_\_\_\_ Type of Application: \_\_\_\_\_

Received By: \_\_\_\_\_ Date: \_\_\_\_\_

Entered By: \_\_\_\_\_ Date: \_\_\_\_\_

San Bernardino County